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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/152,290 05/22/2002 PAT 6,717,746 *SA*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *SA*

GERMANY 101 27 227.8 05/22/2001

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 5	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>SA</i> Initials				

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## TITLE

Catadioptric reduction lens

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
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